

2014 Confirmation of Receipt of DNRC Policies By Emergency Firefighters (EFF's)

By signing below, I agree that as a condition of employment with the State of Montana, Department of Natural Resources and Conservation (DNRC), I will comply with the following listed DNRC policies:

Policy Name		Number	Date	Initials
1.	Drug Free Workplace Policy	P-DNRC-HR-022	06/25/02	
2.	Model Rules of Conduct	P-DNRC-HR-041	11/18/07	
3.	Public Information Policy	P-DNRC-OP-OO4	09/10/12	
4.	Substance Abuse / Use Policy	P-DNRC-HR-010	11/21/95	
5.	State Vehicle Use (ARM)	P-DNRC-HR-037	03/08/13	
Optional Policies				
6.	Drug & Alcohol Testing	P-DNRC-HR-006	10/03/95	
7.	Drug & Alcohol Testing Addendum	P-DNRC-HR-0006A	11/01/96	

I acknowledge that the DNRC hir	ing office has mad	e these policies available to				
me, and declare that, prior to signing this form; I have read and do understand						
these policies.						
Print Name	Date	Signature				